

AA Plus Opt in Application Form

TO BE COMPLETED IN BLOCK CAPITALS.

PERSONAL DETAILS

Title	Surname	First name
Payroll number		National Insurance number
Email address*		

* Please note, your email address will be used to contact you with regard to your membership of the AA Pension Scheme from time to time.

ONLY COMPLETE THIS FORM IF YOU WISH TO OPT IN TO AA PLUS.

I confirm:

- That I am an active member of the AA Pension Scheme (the Scheme).
- I understand that the Employer operates a Salary Sacrifice arrangement known as AA Plus and that I wish to participate in this arrangement, therefore benefiting from the arrangements outlined in the AA Plus Guide.
- As a member of AA Plus, I understand that my gross contractual rate of pay will be reduced by the amount of the employee contribution I pay into the Scheme. I further understand that the Employer will pay an amount directly into the Scheme equal to my employee contribution rate in addition to their employer contribution.
- I have either received a copy of the AA Plus Guide or have referred to **www.AApensions.com** where a copy is available to view. I agree to be bound by the Rules of the Scheme.
- I understand that if I were to leave AA Plus for any reason other than leaving employment, such as a lifestyle event, the deduction of contributions from my pay at the applicable rates due under the Scheme (as amended from time to time) will re-commence as ordinary Scheme contributions in order to maintain my Scheme membership.
- I understand that if I leave the CARE section of the Scheme within the first three months of joining it, I will automatically receive a refund of any contributions I have made either personally or through AA Plus less any statutory deductions.

Please tick this box if you would like your request acknowledged by email using the address above.

Signature

Date

By signing this form you acknowledge that you have read the statement entitled Data Protection set out overleaf.

Please return this form to:
AA Payroll Processing, Fanum House, Basing View, Basingstoke, RG21 4EA

FOR PAYROLL / PENSIONS USE ONLY

Authorised by
Pensions Department:

Passed to
Payroll date:

Actioned date:

Actioned by:

Data Protection

The Trustee Company will hold personal data provided by you (and, where appropriate, by third parties such as the AA as your employer/former employer) for the purpose of calculating and providing your benefits and your dependants' benefits under the AA Pension Scheme.

The Trustee Company needs to use your personal data:

1. To fulfil its legal obligations, such as giving you specified information about your benefits as required by pension legislation; and
2. To meet its legitimate interests to administer the AA Pension Scheme efficiently and to pay benefits to you and your dependants in accordance with the Scheme rules.

The Trustee Company may share your personal data with others (within the United Kingdom or in any other country) where it thinks it is necessary or desirable to do so in connection with the administration of the AA Pension Scheme. In particular the Trustee Company may make the information available to its professional advisers, to the Scheme's administrators and to any other persons who may become responsible for providing benefits. It may also make this information available to the AA.

The Trustee Company has measures in place to protect the security of your personal data and keep it confidential.

You can find out more about how the Trustee Company will use your data by reading the Trustee Company's privacy notice, which can be found at www.AApensions.com/privacy-policy. If you would like a copy of the privacy notice, please request one using the contact details below.

If you have any questions about your Scheme pension, please contact the AA Pensions team using the details below.

Telephone: **0345 850 6406** | Email: AA.pensions@aonhewitt.com | Web: www.AApensions.com